

SHARP MARY BIRCH HOSPITAL FOR WOMEN
SHARP MEMORIAL HOSPITAL
SHARP MESA VISTA HOSPITAL
SHARP VISTA PACIFICA HOSPITAL
SHARP MEMORIAL OUTPATIENT PAVILION
SHARP HOME CARE

February 19, 2013

Merry Holliday-Hanson, Ph.D., Manager
Administrative Data Program
Office of Statewide Health Planning and Development
400 R Street, Room 250
Sacramento, CA 95811

Dear Ms. Holliday-Hanson,

This letter is in response to our receipt of the 2010 and 2011 Hospital Inpatient Mortality Indicators. Sharp Memorial Hospital has comments for four areas: congestive heart failure, PCI, hip fracture and stroke. We appreciate the opportunity to provide feedback regarding our scores.

In response to our 2010 and 2011 congestive heart failure mortality data:

- Sharp Memorial Hospital has the largest advanced heart failure program in San Diego County, offering patients heart pumps and transplants since 1985. Because of this expertise, Sharp Memorial serves as a large referral center for local and outlying hospitals that do not have further medical/surgical treatment options for their patients. For example, in 2011, 31% (11/35) of the patients in the reported mortality data were transferred by physicians at other hospitals to the cardiologists at Sharp Memorial Hospital to receive a higher level of care and our experience with these critical patients. Our mission in the community is to continue to improve outcomes in all heart failure patients and offer advanced therapies for the best chance of survival.

In response to our 2011 PCI mortality data:

- A review of the 2010 data and the 2012 data found results in line with other hospitals. Regarding the 2011 PCI mortality data, the 4.4% mortality rate reflects our in-patient volume only. It's important to note that an additional 43% of patients were treated as out-patients with zero mortality, which is not included in OSHPD data. This data, however, is measured by the American College of Cardiology (ACC), which shows a mortality rate of 2.03%.

Also of note, Sharp Memorial's 2010 OSHPD reported data was within the state average, and our 2012 data has shown a decrease in mortality with a similar procedural volume.

In response to our 2010 hip fracture mortality data:

- Hip fracture data showed a 5.4% rate reported for CY 2010. All cases were carefully reviewed and the following findings were noted:
 - Of the eleven patients in the reported data, the average age was 87 years with 82% over 85 years of age and had significant co-morbid conditions such as cancer, chronic obstructive pulmonary disease and cardiovascular conditions.
 - A review of the 2011 and 2012 hip fracture data found results in line with other hospitals.

In response to our 2010 and 2011 stroke mortality data:

- CY 2010 stroke data, an 11.5% mortality rate was reported. A careful review of all cases showed that 38% of these patients had low probability of survival as noted below:
 - 6% of the cases arrived in cardiac arrest.
 - 22% of the 49 reported cases arrived with significant neurological deficits, i.e., brain herniation and/or fixed dilated pupils due to massive ischemic strokes or hemorrhages.
 - 10% of the 49 cases were terminal due to advanced stage cancer.
- CY 2011 stroke data was similar to 2010. A 10.8% mortality rate was reported and a review of cases showed that 40% of patients also had low probability of recovery as noted below:
 - Of the 46 cases reported 61% were hemorrhages, which carry a higher mortality.
 - 40% of the cases reported presented with a National Institute of Health Stroke Score (NIHSS) score greater than 20 upon arrival. A high NIHSS score (20 or above) indicates the patient had severe neurological impairment.

Thank you for allowing us to provide feedback on our programs,

Tim Smith, CEO



Sharp Memorial Hospital